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Application Number

## October 17, 2005 CORRESPONDENCE ADDRESS Filing Date Application Peter Norman Langmead First Named Inventor Art Unit Address to: Commissioner for Patents **Examiner Name** P.O. Box 1450 Alexandria, VA 22313-1450 126429.00003 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with V Customer Number: 25555 OR Firm or Individual Name Address City State Zip Country Telephone **Email** This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire Interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 34,365 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature Typed or Printed ROBERT C. KLINGER Name Telephone 214-953-5978 Date JANUARY 16, 2007 NOTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below J -Total of forms are submitted.

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